

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 3/1/09

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	34,975	0.1 %
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

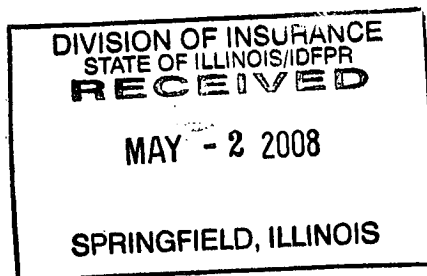
Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

The purpose of this filing is to adopt the Insurance Services Office, Inc.'s Division Five – Fire and Allied Lines in place of our existing Advantage Commercial Package Product. The Advantage Commercial Package Program utilizes ISO Division Five – Fire & Allied Lines loss costs, rules and rating plans with company exceptions to certain ISO rules, most notably all other perils rating rules, time element rating factors, deductible factors, and schedule rating. In converting to ISO we will now utilize the ISO Division Five rules and loss costs without exception

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.



ACE American Insurance Company
Name of Company

Renice Cox, Regulatory Specialist
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 3/1/09

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	6,728	0.1 %
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

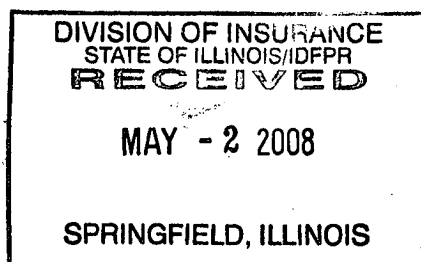
Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

The purpose of this filing is to adopt the Insurance Services Office, Inc.'s Division Five – Fire and Allied Lines in place of our existing Advantage Commercial Package Product. The Advantage Commercial Package Program utilizes ISO Division Five – Fire & Allied Lines loss costs, rules and rating plans with company exceptions to certain ISO rules, most notably all other perils rating rules, time element rating factors, deductible factors, and schedule rating. In converting to ISO we will now utilize the ISO Division Five rules and loss costs without exception

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

ACE Fire Underwriters Insurance
Company

Name of Company

Renice Cox, Regulatory Specialist
Official - Title

SERFF ALSX-125644719

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 7/3/08

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Residential Fire</u>	\$1,270,749	-0.1%
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: No.

Brief description of filing. (If filing follows rates of an advisory

organization, specify organization): This filing includes a revision to the distinct charge to cover the net cost of reinsurance in Allstate Insurance Company for the Residential Fire program in the state of Illinois.

Allstate's revised 2008 reinsurance cost for the Residential Fire program is minimal, so we have selected to set the reinsurance rate adjustment factor to zero. This revised factor will apply to the calculation of the reinsurance charge for all policies, and will have the same effect as removing the reinsurance charge.

Allstate will evaluate reinsurance cost periodically, preserving the rating structure will enable Allstate to monitor and update the reinsurance rate adjustment factor in the future as appropriate.

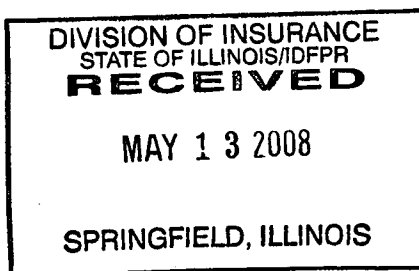
The overall impact of changes set forth in this filing is -0.1%.

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

Allstate Insurance Company
Name of Company

Stephen J. Burbick - State Filings Director
Official - Title

H29219D



ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 6/1/2008 NB & RB

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	\$1,003,600	-14.4%
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): ISO

Please refer to the enclosed Actuarial Memorandum.

*Adjusted to reflect all prior rate changes.

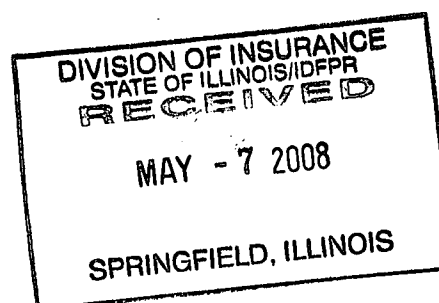
**Change in Company's premium level which will result from application of new rates.

American Fire and Casualty Company

Name of Company

Amy LaCroix, Technician, Regulatory Filing

Official - Title



SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 7/1/08

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	265,522	-30.2%
10. Extended Coverage	205,549	6.5%
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Earthquake</u>	4,651	-33.6%
Line of Insurance		

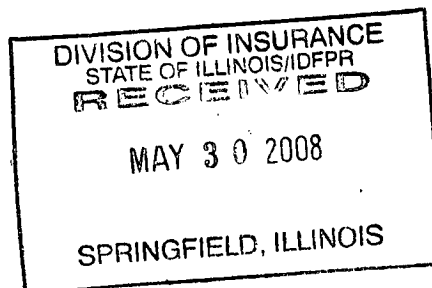
Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of ISO Revised loss costs and related rules found in filing designation numbers CF-2007-RLA1,
CF-2006-RLA1, CF-2006-REQ1 and CF-2006-REQRU

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.Employers Mutual Casualty Company

Name of Company

Don Coughenower
Assistant Vice President

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 7/1/08 new, 8/15/08 renewals.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	159,000	+9.6%
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: N/A

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization):

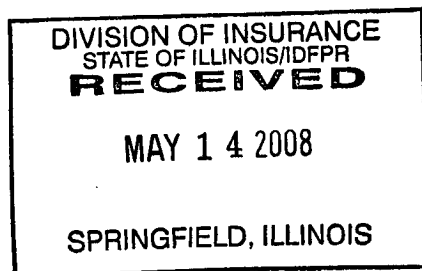
Introduction of Professional Property Management

Company Discount, Corporate Owned Property Surcharge and Insurance Bureau Score Adjustment.

Filing follows ISO loss costs with Company loss cost multiplier.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.



Fidelity National Insurance Company

Name of Company

George Shields, Consulting Actuary, Perr & Knight

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 7/1/08

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	1,855,941	-28.6%
10. Extended Coverage	1,270,038	6.4%
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Earthquake</u>	27,780	-33.9%
Line of Insurance		

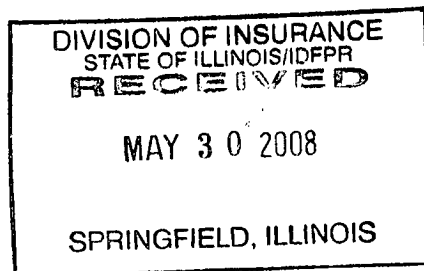
Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of ISO revised loss costs and related rules found in filing designation numbers CF-2007-RLA1,
CF-2006-RLA1, CF-2006-REQ1 and CF-2006-REQRU

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.Illinois EMCASCO Insurance Company

Name of Company

Don Coughennower
Assistant Vice President

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective June 1, 2008

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	924,107	-15.0
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____		
Line of Insurance		

 Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

 Brief description of filing. (If filing follows rates of an advisory organization, specify organization): ISO Revised Commercial Fire and Allied Lines Advisory Prospective Loss Cost Revision, ISO Filing CF-2007-RLA1

*Adjusted to reflect all prior rate changes.

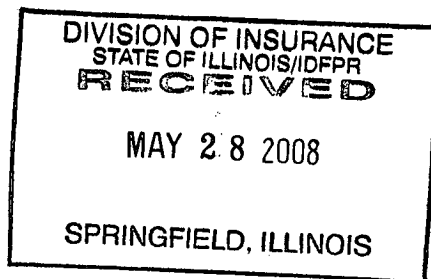
**Change in Company's premium level which will result from application of new rates.

Navigators Insurance Company

Name of Company

Joanne Burns, AVP

Official - Title



ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective _____

6/1/2008 NB & RB

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	\$1,083,034	-14.4%
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other _____		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): _____ ISO

Please refer to the enclosed Actuarial Memorandum.

*Adjusted to reflect all prior rate changes.

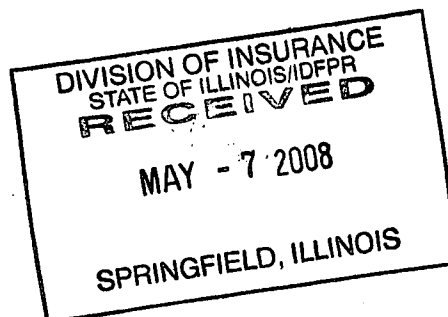
**Change in Company's premium level which will result from application of new rates.

The Ohio Casualty Insurance Company

Name of Company

Amy LaCroix, Technician, Regulatory Filing

Official - Title



Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 8/01/2008.

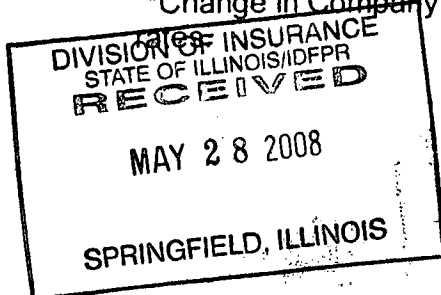
	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois) *	Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	1,683,832	-10.0
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization): Reference adoption and LCM's are updated as shown.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new



SECURA, Insurance, A Mutual Company

Name of Company

Daniel P. Ferris - Official

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

6/1/2008 NB & RB

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	\$2,502,690	-14.4%
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): ISO

Please refer to the enclosed Actuarial Memorandum.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

West American Insurance Company

Name of Company

Amy LaCroix, Technician, Regulatory Filing

Official - Title

